## STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

RECEIVED

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Nimma aft abbudatat			NEW HAMPSHIF DEPARTMENT OF S
. Name of Lobbyist(s)	avid G. Collins		
I. Name of lobbyist's par	tnership, firm or cor	poration, if any:	
Rath, Young and Pign (Name of part)	natelli P.C.		
(Name of parti	nership, firm or corporation)		
II. Name of Client			DateJuly 25, 2017
olitical Contributions			
or each political contribut			ter 664 paid on behalf of the
lient/lobbyist and lobbyin	g firm, indicate the fo	llowing:	
Full name of candidate:	Boutin	David	
	(Last Name)	(First Name)	(Middle Name/Initial)
mount of contribution \$	250.00	Office Candidate i	s Seeking
nter an estimated value and t	the word "estimate."		
nter an estimated value and t	the word "estimate."		
nter an estimated value and t	the word "estimate."		
nter an estimated value and the state of the	(Last Name)	(First Name)	
Full name of candidate:  Amount of contribution \$  f the contribution is an in-kinctual cost of the in-kind con	(Last Name)  nd contribution, provide tribution on the line abo	(First Name)	
Full name of candidate:  Amount of contribution \$  f the contribution is an in-kinctual cost of the in-kind con	(Last Name)  nd contribution, provide tribution on the line abo	(First Name)	(Middle Name/Initial)  ds or services provided, and enter the
Full name of candidate:  Amount of contribution \$  f the contribution is an in-kinctual cost of the in-kind con	(Last Name)  nd contribution, provide tribution on the line abo	(First Name)	(Middle Name/Initial)  ds or services provided, and enter the
Full name of candidate: Amount of contribution \$ f the contribution is an in-kinctual cost of the in-kind contributer an estimated value and	(Last Name)  nd contribution, provide tribution on the line abothe word "estimate."	(First Name)  a description of the good ve for amount of contrib	(Middle Name/Initial)  ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kin	(Last Name)  nd contribution, provide tribution on the line abo	(First Name)	(Middle Name/Initial)  ds or services provided, and enter the

If the contribution is an in-kind contribution, provide a descriptio actual cost of the in-kind contribution on the line above for amou enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contributions)	ons on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby so is true and complete to the best of my knowledge and belief	
(Signature of lobbyist)	<u>July 26, 2017</u> (Date)
David G. Collins	
(Print Name of lobbyist)	